THE MINISTER, OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (KUMARI SAROJ KHAPARDE); (a) and (b) A National Workshop of Voluntary Organisations was held at New Delhi in January, 1988 to consider the role of voluntary organisations in health pare delivery. This Workshop continued its deliberations through a Working Group of Experts. Government have not so far set up any Expert Group or received the final recommendations of the workshop.

Bachawat Tribunal Award

3050. SHRI H. HANUMANTHAPPA: Will the Minister of WATER RESOURCES be pleased to state:

(a) whether the Bachawat Award given by the Tribunal regarding the sharing of the Krishna waters by the concerned State Government is final and binding on all the States concerned;

(b) the name of the agency responsible to enforce the terms and conditions of the Award and whether the Government of India have to consider the proposals received by the different State Governments in the Krishna basin area within the framework of the Award or whether the Government of India are at liberty to go beyond the limits of the Award for clearing the Projects received from the States concerned; and

(c) if so, what is the legal effect of such clearance by the Central Government on the rights of the States concerned?

THE MINISTER OF STATE IN THE MINISTRY OF WATER RESOURCES (SHRIMATI KRISHNA SAHI) (a) and (b) The decision of the tribunal is final and binding on the parties to the dispute and should be given effect to by them. The aspect of water availability in any proposed project is examined within the frame-work of the award of the tribunal.

(c) Does not arise.

Telngn Ganga Irrigation Project

3051. SHRI H. HANUMANTHAPPA: Will the Minister of WATER RESOURCES be pleased to state:

(a) whether the Telugu Ganga Irrigation Project has been prepared and submitted to the Government of India withia the framework of the Bachawat Award; and

(b) if so whether the Government of India are obliged to clear this project even if it is not prepared in conformity with the terms and conditions of the Award?

THE MINISTER OF STATE IN THE MINISTRY OF WATER RESOURCES (SHRIMATI KRISHNA SAHI): (a) and (b) The Governments of Karnataka and Maharashtra have raised the issue that the Telugu Ganga Project as formulated by Andhra Pradesh is not in conformity with the award of the Krishna Water Disputes Tribunal. The clearance of the project also depends on establishing the water availability for the project in terms of the Tribunal's order.

Rare Earth Plant at Sathankulam

3052. SHRI M. VINCENT: Will the PRIME MINISTER be pleased to state:

(a) what is the stage in the implementation of a Rare Earth Plant at Sathankul-lam in V. O. E. District of Tamil Nadu;

(b) whether the plant at Sathankulam i_s planned to manufacture the finished products such as oxides and salts of the rare earths which would be a better Foreign exchange earner; and

(c) whether Government have received any application for letters of intent from the Private Sector to set up modern factories utilising the rare earth of the Jir-unelveti and Kanyakumari Coasts?

THE MINISTER OF STATE IN THE MINISTRY OF SCIENCE AND TECNOLOGY AND THE MINISTER OF STATE IN THE DEPARTMENTS OF OCEAN DEVELOPMENT, ATOMIC ENERGY, ELECTRONICS AND SPACE (SHRI K. R. NARAYANAN)-, (a) and (b) There is no proposal for setting up a Rare Earth Plant at Sathankulam in VOC District of Tamil Nadu. Indian Rare

Earths Ltd. is planning to set up only a mineral seperation plant at Santhankulam. The Company has applied for mining lease for deposits at Kudiraimoli in VOC District. The application has not yet been cleared by the State Government.

(c) No, Sir. Department of Atomic Energy has not received any application for letters of intent from the Private Sector to set up modern factories utilising the rare earths of the Tirunelveli and Kenyakumari Coasts.

Homoeopathy Central Council Act, 1973

3053. SHRI RAM CHANDRA VIKAL: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether Government are aware of the fact that the relevant provisions of the Homoeopathy Central Council Act, 1973 to the effect that any person whose name is for the time being 'borne on Part-II of the Central Register of Homo eopathy, may practise Homoeopathy in any State other than the State where he *is* enrolled on the State Register of Ho moeopathy, have not yet been implemen ted arid if so, the reasons thereof; and

(b) what steps Government propose to take to expedite implementation of the said provisions?

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (KUMARI SAROJ KH-APRDE); (a) and (b) The Government are aware of the existing provision of the Homoeopathy Central Council Act, 1973 which is reproduced below:

"26(2) Subject to the provisions of sub-section (3) of Section 15, any person whose name is for the time being borne on Part II of the Central Register of Homoeopathy, may practise Homoeopathy in any State, other than the State where he is enrolled on the State Register of Homoepathy with the previous approval of the Government of the State where he intends to practise."

The Central Council of Homoeopathy are taking steps to implement this pro vision.

Care of Newly Born Babies in Govern, ment Hospitals

3054. SHRI KAILASH PAT1 MISHRA: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether Government's attention has been drawn to a report which appeared in the Hindustan Times dated 25th October, 1988 that babies cuddled by their mothers for at least 20 minutes immediately after birth cried less, sleep (better and fed more easily than other babies;

(b) whether it is a fact that in the Safdarjang and other Government hos-pitas, babies are returned to their mothers after more than half an hour or so, after their birth aud thus they lose an important opportunity mentioned above; and

(c) what are the instructions issued in this regard?

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (KUMARI SAROJ KHAPARDE): It is a fact that immediate handling and cuddling the new born babies by mothers has been shown to be beneficial in the form of reduced crying and better feeding behaviour of new born babies by studies conducted in the west. In Safdarjung and other Hospitals the babies are immediately shown to their mothers. However, several mothers are not in a position to cuddle their babies immediately after delivery because of physical exhaustion of labour and sedation anaesthesia. High risk babies who demand specialized care are shifted to the nursery. The mothers are allowed to visit the nursery to see and touch their babies.

No such instructions can be issued in this regard as the mother has to be observed in the labour room for two hours after delivery for any complications like excessive bleeding, per yaginum etc.